

2018 Application for Georgia Municipal License Fee
For

Municipal Name: DACULA

City Assigned ID Number: _____

Company Name and Address:

Due Date: _____

FEIN: _____

NAIC Number: _____

	Number of Additional Locations	Fee	Total Amount Due
License Fees for Additional Business Locations	_____	_____	_____
Additional Business Locations with Certain Risks	_____	_____	_____
Sub-Total	_____		_____
Insurer Annual License Fee			_____
Other Fees			_____
Total Amount Due			_____

Signature: _____

Name and Title: _____

Phone: _____

E-Mail: _____

Date: _____